



# ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

11/06/95

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER -> NY0000775171

FACILITY NAME -> SEARS #1114

MAILING ADDRESS -> 3333 BEVERLY RD D824C  
HOFFMAN ESTATES, IL 60179

INSTALLATION ADDRESS -> 2307 BEVERLY RD  
BROOKLYN, NY 11226

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
REGION II  
290 BROADWAY  
NEW YORK, NEW YORK 10007-1866

ATTN: AIR & WASTE MANAGEMENT DIVISION, 22ND FL.  
HAZARDOUS & SOLID WASTE PROGRAMS BRANCH  
RCRA NOTIFICATIONS

TO: WHITNEY, MARGARET  
ENV PROJECT MGR  
SEARS #1114  
3333 BEVERLY RD D824C  
HOFFMAN ESTATES, IL 60179

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

U.S. EPA  
Form Approved, OMB No 2050-0028 Expires 3-30-96  
GSA No. 3246-EPA-OT

Please refer to the instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



# Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received  
(For Official Use Only)

## I. Installation's EPA ID Number (Mark 'X' in the appropriate box)

☒ A. First Notification ☐ B. Subsequent Notification (Complete item C)

## C. Installation's EPA ID Number

NY 0000775171

## II. Name of Installation (Include company and specific site name)

SEARS #1114

## III. Location of Installation (Physical address not P.O. Box or Route Number)

### Street

2307 BEVERLY ROAD

### Street (Continued)

### City or Town

BROOKLYN

### State

### Zip Code

NY 11226-

### County Code

### County Name

047 KINGS

## IV. Installation Mailing Address (See Instructions)

### Street or P.O. Box

3333 BEVERLY ROAD D824C

### City or Town

### State

### Zip Code

HOFFMAN ESTATES IL 60179-

## V. Installation Contact (Person to be contacted regarding waste activities at site)

### Name (Last)

### (First)

WHITNEY

MARGARET

### Job Title

### Phone Number (Area Code and Number)

ENV PROJECT MGR 708-286-8616

## VI. Installation Contact Address (See Instructions)

### A. Contract Address Location Mailing Other

### B. Street or P.O. Box

☐ ☒ ☐

### City or Town

### State

### Zip Code

## VII. Ownership (See Instructions)

### A. Name of installation's Legal Owner

INTERPROP BEDFORD LLC

### Street, P.O. Box, or Route Number

PARK 80 WEST PLAZA II

### City or Town

### State

### Zip Code

SADDLE BROOK NJ 07662-

### Phone Number (Area Code and Number)

### B. Land Type

### C. Owner Type

### D. Change of Owner Indicator

### (Date Changed)

Month Day Year

- - - - -

P

P

Yes

No



ID - For Official Use Only

## VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes; Refer to instructions)

## A. Hazardous Waste Activity

1. Generator (See instructions)  
☐ a. Greater than 1000kg/mo (2,200 lbs.)  
☒ b. 100 to 1000 kg/mo (200-2,200 lbs.)  
☐ c. Less than 100 kg/mo (220 lbs.)
2. Transporter (Indicate Mode in boxes 1-5 below)  
☐ a. For own waste only  
☐ b. For commercial purposes
- Mode of Transportation  
☐ 1. Air  
☐ 2. Rail  
☐ 3. Highway  
☐ 4. Water  
☐ 5. Other - specify \_\_\_\_\_
3. Treater, Storer, Disposer (at installation) Note: A permit is required for this activity; see instructions.
4. Hazardous Waste Fuel  
☐ a. Generator Marketing to Burner  
☐ b. Other Marketers  
☐ c. Boiler and/or Industrial Furnace  
☐ 1. Smelter Deferral  
☐ 2. Small Quantity Exemption  
 Indicate Type of Combustion Device(s)  
☐ 1. Utility Boiler  
☐ 2. Industrial Boiler  
☐ 3. Industrial Furnace
5. Underground Injection Control

## B. Used Oil Recycling Activities

1. Used Oil Fuel Marketer  
☐ a. Marketer Directs Shipment of Used Oil to Off-Specification Burner  
☐ b. Marketer Who First Claims the Used Oil Meets the Specifications
2. Used Oil Burner - Indicate Type(s) of Combustion Device(s)  
☐ a. Utility Boiler  
☐ b. Industrial Boiler  
☐ c. Industrial Furnace
3. Used Oil Transporter - Indicate Type(s) of Activity(ies)  
☐ a. Transporter  
☐ b. Transfer Facility
4. Used Oil Processor/Re-refiner - Indicate Type(s) of Activity(ies)  
☐ a. Process  
☐ b. Re-refine

## IX. Description of Hazardous Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. (Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001) ☐ 2. Corrosive (D002) ☐ 3. Reactive (D003) ☐ 4. Toxicity Characteristic (List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s)) ☒ D008

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See instructions if you need to list more than 12 waste codes.)

1	2	3	4	5	6
7	8	9	10	11	12

C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number; See instructions.)

1	2	3	4	5	6

## X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature

M. Whitney

Name and Official Title (Type or print)

MARGARET L. WHITNEY  
Environmental Project MGR.

Date Signed

10-26-95

## XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)





Margaret L. Whitney  
Environmental Project Manager  
Construction Department  
Dept. D824C

Sears Merchandise Group  
3333 Beverly Road, A2-165B  
Hoffman Estates, Illinois 60179  
Phone: 708/286-8616  
Fax: 708/286-4531

NOV -1 PM 12:36  
HAZARDOUS & SOLID WASTE  
PROGRAMS BRANCH

October 17, 1995

U. S. EPA Region 2  
Air and Waste Management Division  
26 Federal Plaza, Room 505  
New York, NY 10278

To Whom it May Concern:

Enclosed is a Notification of Regulated Waste Activity Form for a Sears facility located in Brooklyn, NY. We are in the process of scheduling removal of this waste and would appreciate your prompt attention to this request.

If possible, please call me at 708/286-8616 once the EPA ID Number is issued or send the notification via facsimile to 708/286-4531.

Thank you for your anticipated cooperation. Please call me if you have any questions.

Sincerely,  
Sears, Roebuck and Co.

Margaret L. Whitney  
Environmental Project Manager

MLW:pas

enc

EPA1114



## ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

09/26/94

This is to acknowledge that you have filed a **Notification of Hazardous Waste Activity** for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER -> NY0000775171

FACILITY NAME -> SEARS #1114

MAILING ADDRESS -> 3333 BEVERLY RD DEPT 824C  
HOFFMAN ESTATES, IL 60179

INSTALLATION ADDRESS -> 2307 BEVERLY RD  
BROOKLYN, NY 11226

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
REGION II  
26 FEDERAL PLAZA  
NEW YORK, NEW YORK 10278

ATTN: AIR & WASTE MANAGEMENT DIVISION, ROOM 1006  
HAZARDOUS & SOLID WASTE PROGRAMS BRANCH  
RCRA NOTIFICATIONS

TO: SNYDER, FREDERICK  
ENV PROJ MGR  
SEARS #1114  
3333 BEVERLY RD DEPT 824C  
HOFFMAN ESTATES, IL 60179



Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



# Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received  
(For Official Use Only)94 SEP 20 AM 12:10  
HAZARDOUS WASTE  
PROGRAMS  
SOLID WASTE  
BRANCH

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)

☒ A. First Notification☐ B. Subsequent Notification  
(Complete Item C)

C. Installation's EPA ID Number

NY 00000775171

II. Name of Installation (Include company and specific site name)

SEARS # 1114

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

2307 BEVERLY RD

Street (Continued)

City or Town

State

Zip Code

BROOKLYN

NY

1

1

2

2

6

County Code

County Name

BROOKLYN

IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

3333 BEVERLY RD DEPT 824C

City or Town

State

Zip Code

HOFFMAN ESTATES

IL

6

0

1

7

9

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (Last)

(First)

SNYDER

FREDERICK

Job Title

Phone Number (Area Code and Number)

ENVIRON PROJ MGR

708-286-8616

VI. Installation Contact Address (See Instructions)

A. Contract Address  
Location Mailing Other

B. Street or P.O. Box

☒

City or Town

State

Zip Code

VII. Ownership (See Instructions)

A. Name of installation's Legal Owner

NORTHERN TRUST COMPANY

Street, P.O. Box, or Route Number

50 SOUTH LASALLE

City or Town

State

Zip Code

CHICAGO

IL

6

0

6

7

5

Phone Number (Area Code and Number)

B. Land Type

C. Owner Type

D. Change of Owner  
Indicator

(Date Changed)

Month

Day

Year

- - - - -

P

P

Yes

No

DAB-04-682-1849

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M. A. H.



ID - For Official Use Only

## VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes; Refer to Instructions)

## A. Hazardous Waste Activity

## 1. Generator (See Instructions)

- ☐ a. Greater than 1000kg/mo (2,200 lbs.)  
☒ b. 100 to 1000 kg/mo (200-2,200 lbs.)  
☐ c. Less than 100 kg/mo (220 lbs.)

## 2. Transporter (Indicate Mode in boxes 1-5 below)

- ☐ a. For own waste only  
☐ b. For commercial purposes

## Mode of Transportation

- ☐ 1. Air  
☐ 2. Rail  
☐ 3. Highway  
☐ 4. Water  
☐ 5. Other - specify

## 3. Treater, Storer, Disposer (at Installation) Note: A permit is required for this activity; see instructions.

## 4. Hazardous Waste Fuel

- ☐ a. Generator Marketing to Burner  
☐ b. Other Marketers  
☐ c. Boiler and/or Industrial Furnace

## Indicate Type of Combustion Device(s)

- ☐ 1. Smelter Refractory  
☐ 2. Small Quantity Exemption  
☐ 1. Utility Boiler  
☐ 2. Industrial Boiler  
☐ 3. Industrial Furnace

## 5. Underground Injection Control

## B. Used Oil Recycling Activities

## 1. Used Oil Fuel Marketer

- ☐ a. Marketer Directs Shipment of Used Oil to Off-Specification Burner  
☐ b. Marketer Who First Claims the Used Oil Meets the Specifications

## 2. Used Oil Burner - Indicate Type(s) of Combustion Device(s)

- ☐ a. Utility Boiler  
☐ b. Industrial Boiler  
☐ c. Industrial Furnace

## 3. Used Oil Transporter - Indicate Type(s) of Activity(ies)

- ☐ a. Transporter  
☐ b. Transfer Facility

## 4. Used Oil Processor/Re-refiner - Indicate Type(s) of Activity(ies)

- ☐ a. Process  
☐ b. Re-refine

## IX. Description of Hazardous Wastes (Use additional sheets if necessary)

## A. Characteristics of Nonlisted Hazardous Wastes. (Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; See 40 CFR Parts 261.20 - 261.24)

## 1. Ignitable (D001)

☒

## 2. Corrosive (D002)

☐

## 3. Reactive (D003)

☐

## 4. Toxicity Characteristic (List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s))

☐

D 0 1 8

## B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See instructions if you need to list more than 12 waste codes.)

1
7

2
8

3
9

4
10

5
11

6
12

## C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number; See Instructions.)

1

2

3

4

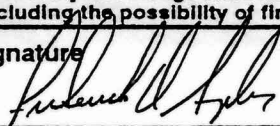
5

6

## X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature



Name and Official Title (Type or print)

FREDERICK A. SNYDER  
 ENVIRONMENTAL PROJECT MANAGER

Date Signed

16 SEPT 94

## XI. Comments

Provisional Only - Waste Transporter Clean Harbors Environmental Services Inc.

MAD039322250

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)



Sears Merchandise Group  
Department 824C A2 - 281A  
3333 Beverly Road  
Hoffman Estates, Illinois 60179  
708 / 286 8864

September 16, 1994

Mr. Jack Hoyt  
EPA Region 2  
26 Federal Plaza Room 505  
New York, NY 10278

Re: EPA Waste Generator Identification Number  
Sears #1114 Brooklyn, NY

Dear Mr. Hoyt:

I am sending to you with this letter a completed application form for a provisional waste generator identification number for the Sears facility in Brooklyn, NY. The number is needed to transport gasoline and used oil from underground petroleum storage tanks which are being removed from the ground at this site.

I appreciate any efforts you make in expediting assignment of the generator number. Thank you for your attention to this matter.

Sincerely,  
Sears, Roebuck and Co.

Bernadine G. Palka, P.E.  
Manager Environmental Engineering